

- No additional claim fee is required.
- An additional claim fee is required, and is calculated as shown below.

AMENDED CLAIMS					
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additional Fe
Total Claims	43	MINUS 43 =	0	x \$18.00 (1202) =	\$ 0.00
Independent Claims	2	MINUS 3 =	0	x \$86.00 (1201) =	\$ 0.00
If Amendment adds multiple dependent claims, add \$290.00 (1203)					
Total Claim Amendment Fee					
<input checked="" type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee					
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT					

- A check in the amount of _____ is enclosed for the fee due.
- Charge _____ to Deposit Account No. 02-4800.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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Alexandria, Virginia 22313-1404
(919) 941-9240

Date: December 15, 2003

By

Sherry M. Caity
Sherry M. Caity
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